
INFORMATIONAL LETTER #99-17

DATE: July 16, 1999

TO: ALL ADMINISTRATORS OF OUTPATIENT PHYSICAL THERAPY AND
SPEECH LANGUAGE PATHOLOGY SERVICES (OPT/SP)

FROM: JOHN W. HATHAWAY, Chief
Bureau of Facility Standards

SUBJECT: REVISED CONDITIONS OF PARTICIPATION

Effective January 1, 1999, nurse practitioners, clinical nurse specialists, and physician assistants are able to review plans of care and results of treatment at least every thirty (30) days for Medicare patients. Formerly only physicians could review the plans of care and results of treatment for Medicare patients. This change resulted from a revision to 42 CFR 485.711(b) a copy of which is enclosed.

I hope this information will be useful to you. Should you have further questions regarding this change, please contact Sylvia Creswell, NonLTC Supervisor at (208) 334-6626 or via e-mail at creswsa@mmis.state.id.us.

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